

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	LY		12-20-99
O.I.P.E. CLASSIFIER		18	1-5-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	AS	59229	1/12/00

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	08/02/97
2	✓	✓	08/02/97
3	✓	✓	08/02/97
4	✓	✓	08/02/97
5	✓	✓	08/02/97
6	✓	✓	08/02/97
7	✓	✓	08/02/97
8	✓	✓	08/02/97
9	✓	✓	08/02/97
10	✓	✓	08/02/97
11	✓	✓	08/02/97
12	✓	✓	08/02/97
13	✓	✓	08/02/97
14	✓	✓	08/02/97
15	✓	✓	08/02/97
16	✓	✓	08/02/97
17	✓	✓	08/02/97
18	✓	✓	08/02/97
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23	✓	✓	08/02/97
24	✓	✓	08/02/97
25	✓	✓	08/02/97
26	✓	✓	08/02/97
27	✓	✓	08/02/97
28	✓	✓	08/02/97
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31	✓	✓	08/02/97
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42	✓	✓	08/02/97
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44	✓	✓	08/02/97
45	✓	✓	08/02/97
46	✓	✓	08/02/97
47	✓	✓	08/02/97
48	✓	✓	08/02/97
49	✓	✓	08/02/97
50	✓	✓	08/02/97

Claim	Final	Original	Date
51	✓	✓	08/02/97
52	✓	✓	08/02/97
53	✓	✓	08/02/97
54	✓	✓	08/02/97
55	✓	✓	08/02/97
56	✓	✓	08/02/97
57	✓	✓	08/02/97
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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